Use this section of the workbook together with the corresponding Action in the Guide, *Action 4: Create or strengthen appropriate partnerships*

Tool 4.1: Partner identification and selection

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

You need to be strategic when selecting your partners. Your decisions should be based on the likelihood that particular organisations will help you produce the results you would like to achieve. All of the tools in Workbook Section 3 will be useful in going through these exercises, so you should review them and keep them handy as you go through this process of partner identification. Tool 3.1, the Situation Analysis, helped you identify programmatic gaps that your organisation might fill, and listed the other organisations working in your area. The Organisational Analysis (Tool 3.2) helped you identify any gaps in your organisation's capacity to implement TB-related activities. Finally, the Activity Prioritisation Matrix (Tool 3.3) helped you choose the activities you are best suited to implement, and to identify gaps that remain in your capacity to implement those activities. It also listed the activities that would be helpful to implement, but are lower priority for your organisation. Go back to these tools and review the information you have to remind yourself of the gaps you have identified. Potential partners should complement your organisation's work and add to your strengths and technical expertise. The partnerships you create should be ones that can fill gaps for the activities you have chosen to do, or can do the activities your organisation has not prioritised.

Below are a few simple questions you can ask yourselves to help you start the process of selecting your partners. You can answer these questions using the template on the next page. An example is provided, followed by a blank template you can use.

Ask yourself:

- Does this organisation/partner have specific technical expertise that my organisation does not possess?
- Can this organisation/partner fill a funding gap that my organisation is experiencing in order to implement certain activities?
- Can this organisation/partner fill the geographical or population coverage gaps that my organisation is experiencing?
- Does this organisation have political connections that can be useful for our work?
- Are there other benefits to partnering with this group?
- Are there some drawbacks if I partner with this organisation?
- Are there other organisations besides these with whom we should consider partnering?

Comment: *Identifying the* <u>right</u> *partner organisations to complement your programme is a difficult process. It needs a very careful review, not only of the organisation's capabilities and technical expertise, but also of its reputation and credibility, and how its other partnerships have functioned in the past – all of which may have an impact on your own partnership with this organisation. You can use the "potential drawbacks" column in the template on the following pages to record any possible issues you might encounter in working with a partner.*

Tool 4.1:
Partner identification and selection

Example of potential partner analysis

Organisation: ___Community Activists for Health_____ Project: _____Fight TB, 2014–2015_____

Potential partner	Benefits						Potential drawbacks
	Has necessary technical expertise	Has necessary funds or other resources	Has necessary geographic coverage	Reaches key target groups	Has necessary political power	Other (describe)	
Metta Community Helpers			✓	✓			Are sub-recipients under Global Fund. May not have time for activities.
District Association of Private Physicians	✓				✓	✓ (history of partnerships with this group)	Have a poor relationship with the NTP.
Best Clothing Company, Ltd.		✓		✓			Low priority topic for the company. Will require advocacy.
District Y Primary Care Clinic	✓	✓	✓				
World Health Organization country office	✓				✓		Agreements take a long time to be approved.

Once you have completed the table, review and discuss your potential partners. You can gather more information on the selected partners by using Tool 3.2 *(Organisational analysis)* to assess their organisational strengths. Decide which of the partners are best suited to this project and clearly describe why you would like to have them as partners. Then move to the next step of discussing your project with partners and developing partnership agreements.

Tool 4.1:
Partner identification and selection

Potential partner analysis

Organisation: _____ Project: _____

Potential partner	Benefits						Potential drawbacks
	Has necessary technical expertise	Has necessary funds or other resources	Has necessary geographic coverage	Reaches key target groups	Has necessary political power	Other (describe)	

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Tool 4.2: Partnership plan checklist and sample memorandum of understanding

A partnership plan defines the way in which different organisations will work together to achieve a common set of objectives. To make a partnership work smoothly, it is important that all aspects of the project and the relationships among the partners are as clear as possible to avoid misunderstandings. The checklist below can help you plan the partnership to make it successful and efficient. Write all of these aspects into a document that the partners sign, and provide *each partner* with a copy of the plan so that everyone is aware of how the partnership will function. This document complements your work plan, which describes what each partner will do and by when. A sample partnership plan follows this checklist. It is only a sample, and you can modify it to make it work for your situation. Following the sample plan, we also include a real-life sample of a memorandum of understanding (MOU) for a project to show you another way to approach an agreement with partners. No one way is right or wrong. Just remember that the more detail you can put in your plan, the easier it will be for partners to participate in the project as you intended them to do. The final sample in this tool is a task matrix. A task matrix is an easy way to see which partners are responsible for which kinds of activities in your project. It summarises the details you will develop in your work plan. If you find it useful, you may adapt it for your own needs.

Partnership plan checklist

✓	Partnership plan item
	Project name
	Start and end dates of the project
	Brief project description
	Geographic area of the project
	Lead organisation and project director contact information
	Partner organisations and contact person information
	Roles and responsibilities of each organisation
	Decision-making • Who will be involved in decisions about project strategy? • Who will be involved in developing the work plan • Who will be involved in decisions about problems • Who will be involved in decisions about budget and finance • Who approves project-related documents and products (such as presentations) • How credit will be given to each organisation in the partnership

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

✓	Partnership plan item
	Communication • Who is the contact person for each group • What information will be communicated • How you will communicate (phone, email, meetings) • How often you will communicate • Who is responsible for external communication (with donor, the media, etc.)
	Reporting and monitoring • Who is the point person in each group • Who will be involved in monitoring the project • How project-related data will be shared • What information be reported • What format that information should take • When reporting is due
	Project budget and allocations of budget to partners • How project funds will be managed • How funds will be provided to each partner • When funds will be provided • Requirements for receiving funds • How any other project resources will be used or shared (vehicles, office equipment, etc.)
	Project partner calendar
	Partnership evaluation • How the partnership function will be evaluated • When evaluation will be done

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Sample partnership plan agreement

Project name: Fight TB
Start and end dates: 1 January 2014–31 December 2015

Project description:
This is a two-year project funded by World Health Foundation that is aimed at increasing TB case-finding and treatment success among people living with HIV in one districts with the heaviest burden of HIV and of HIV-related mortality in the country. The project will used 25 trained community volunteers to conduct community education and home-based TB screening of people living with HIV, followed by referral to the health clinic for those with symptoms based on a standard questionnaire. In addition, volunteers will conduct contact tracing in households of people diagnosed with TB during the project period. They will provide treatment support for all community members diagnosed with TB. The expected outcomes of the project are an increase in TB case notification rates from 110/100,000 to 150/100,000 and an increase in treatment success from 80% to 90% in the district by December 2015.

Geographic area: District Y in Country A

Lead organisation and contact:
Community Activists for Health (CAH)
Andrea Solara, Project Director
P.O. Box 224
Newtown 65432

Mobile: 7586970
Email: asolara@cactivists.com
Website: www.cactivists.com

Partner organizations and contacts

Partners Against TB (PAT)
Simon Apani
65 Electric Avenue
Someville 65789

Mobile: 4356219
Email: sapan1@pat.org
Website: www.PartnersATB.org

District Y Primary Care Clinic

Teresa Patan
99 Liberation Street
Hopeton 65222

Mobile: 8675309
Email: terpat@yahoo.com
Website: www.CountryANTP.org

Roles and responsibilities

Community Activists for Health: CAH is the lead organisation for this project, responsible for all aspects of project management and for overseeing all implementation activities. CAH will be responsible for:

- donor communication
- external communication
- work plan development and monitoring
- budget development and monitoring
- sub-agreements with partners
- procurement and tracking of all project equipment and supplies
- reporting
- implementation
- reporting
- implementation activities in District Y.

Partners Against TB: PAT is a partner on this project. PAT is responsible for the following general areas, further detailed in the work plan:

- implementation activities in prisons in District Y
- participation in project management activities.

District Y Primary Care Clinic: District Y Primary Care Clinic is a partner on this project. The clinic is responsible for the following activities, further detailed in the work plan:

- training of trainers for community outreach work
- supervising community volunteers in District Y
- supporting project M&E and reporting by working with CAH to collect and analyse project data
- providing diagnostic and treatment services to all people diagnosed with TB in District Y
- participation in project management activities.

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

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Decision-making

CAH will participate in all decisions related to project activities to ensure consistency with the overall agreement with World Health Foundation. CAH will involve partners in developing the annual work plan and budget through a weeklong planning meeting at CAH offices held one month before the start of each project year. If problems arise related to project implementation, decisions will be taken in consultation with concerned partners. CAH will remain the final decision-making body in the event that partners cannot be reached or there is a disagreement about how to proceed. All documents and other materials produced as a result of this project must be reviewed and approved by CAH prior to their distribution. This review should be built into project schedules.

Credit for project activities will be shared by all the partners. The project will develop a logo that includes all partner logos. This is the official logo that will be used on all documents, presentations and other materials produced by the project. Any information distributed about project activities will use the Fight TB project name and will identify all partners in the project.

Communication

External communication with the donor and the media are the sole responsibility of CAH. If partner organisations receive media inquiries, they should consult with CAH before agreeing to comment or provide information on the project.

The contact persons listed above will be responsible for communication between the three partners. Regular communication will include the following:

- monthly project meetings held at CAH offices on the first Thursday of each project month.
- weekly email communication to provide any updates on implementation activities. CAH will circulate any important project-related correspondence from the Global Fund or the NTP to all partners within two days of its receipt
- phone calls as needed for urgent matters that require immediate decisions.

Agendas for all meetings will be circulated at least one day prior to the meeting. All meetings and other communication will be documented in writing and circulated to all partners within one week.

Reporting

The contact persons listed above are responsible for reporting to CAH on progress from their organisations on a quarterly basis. The report should include the following information:

- status of work plan activities
- data related to those activities (indicators defined in the work plan)

- problems or challenges encountered during the reporting period and how they were addressed
- plans for the upcoming quarter.

The quarterly reports are due on the following dates:

- 20 March
- 20 June
- 20 September
- 20 December

In addition to the quarterly report for December, an annual report summarising all progress during the project year is required. The annual report is also due on 20 December and should follow a similar format to the quarterly reports. The annual report should include a one-page highlighted success story related to the work of the organisation on this project. A sample is attached to this plan.

Project budget and allocations to partners

The total project budget for this two-year project is $350,000. Budget allocations will be made to partners based on activities developed in the work plan and negotiations with the finance manager at CAH. Payments will be made to partner organisations as follows:

- 25% of budget at project start to cover start-up costs
- quarterly from the second quarter onwards to cover budget of anticipated activities for the quarter.

Release of funds will not be made until accounting for existing funds has been provided, activities have been completed, and progress reports have been received and approved by the project director.

The project has one vehicle assigned for its use. This vehicle will be used primarily by CAH for project implementation and monitoring activities. If partner organisations require use of the vehicle for project activities, they should communicate their needs in advance to the project director.

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

Project calendar

Please refer to the work plan for detailed activity due dates. In addition, this calendar provides key project management-related dates for year 1 of the project.

12–17 December 2013:	Year 1 work plan development meeting
10 January 2014:	Project launch press conference
6 February:	Monthly partners' meeting
3 March:	Monthly partners' meeting
20 March:	First quarterly progress report due to CAH
4 April 4:	Monthly partners' meeting
5 May:	Monthly partners' meeting
3 June 3:	Monthly partners' meeting
20 June:	Quarterly report due to CAH
2 July:	Monthly partners' meeting
4 August:	Monthly partners' meeting
5 September:	Monthly partners' meeting
20 September 20:	Quarterly report due to CAH
5 October:	Monthly partners' meeting
4 November:	Monthly partners' meeting
5 December:	Annual partners' meeting
20 December:	Quarterly and annual reports due to CAH

Partnership evaluation

In addition to evaluating progress on the activities and objectives of the project, partners will assess how the relationship between the organisations is functioning on a quarterly basis, and make adjustments as needed to ensure that the project is going smoothly. During the regular partners' meetings for each quarter, the agenda will include a check-in on any partnership issues (such as communication, payments, etc.). Any changes will be documented in the minutes of the meeting.

In addition, the partners will be asked for written feedback on the partnership at the end of the year to document any challenges and best practices. CAH will include this and its responses in the report back to the partners at the end of the year.

Sample of Partnership Memorandum of Understanding

This sample MOU was drawn up between the Provincial Ministry of Health (MOH) in Cambodia and private sector pharmacies in the province in an effort to work together to implement the National Public-Private Mix Strategy for TB control. The MOU clearly outlines the objectives and the key responsibilities of each partner.

Memorandum of Understanding between MOH and Pharmacies

Kingdom of Cambodia
"Nation, Religion, King"
Ministry of Health
Provincial Health Department

Memorandum of Understanding between [private sector provider] and [Province] Provincial Health Department, Ministry of Health, Cambodia

Director: _____

Pharmacy/depot/cabinet: _____

Address: _____

Phone: _____

This Memorandum of Understanding (MOU) has been prepared with the objective to serve the public through support of public sector activities to increase case detection and treatment of tuberculosis (TB). The private sector providers and the Provincial Health Department (PHD) herein agree to integrate TB private-private mix (PPM) of directly observed therapy, short course (DOTS) for TB control activities in [province] Province. Both parties will agree to cooperate with each other as follows:

Private provider representative agrees to:
- Participate in TB PPM DOTS activities in [province] Province;
- Collaborate with PHD, National Tuberculosis Program (NTP), and operational district (OD) teams and related organisations for the duration of this agreement;
- Participate in the trainings and workshops related to TB, PPM, and referrals;
- Provide accurate and correct information about TB to clients presenting with TB-like symptoms by following the national TB guidelines;
- Refer all clients with TB-like symptoms to previously identified public DOTS services for follow-up and evaluation;
- Fill in the referral slip and provide clients with correct instructions on its use;
- Keep the referral records and provide information on referral activities to the PHD/OD teams as requested; and
- Remain open to monitoring and regular supervision from the PHD and OD teams.

(continued on next page)

[Province] Provincial Health Department agrees to:

- Conduct regular assessments of private providers, with support from partner organisations;
- Provide general guidance and direction to the design and strategy of PPM activities;
- Cooperate with NTP, OD teams, and other partner organisations to organize and facilitate training workshops for private health providers in the TB PPM network;
- Provide technical support and instructional materials related to the TB PPM activities;
- Develop guidelines and reporting systems for clients presenting to private providers with TB-like symptoms;
- Strengthen and improve public DOTS services in accordance with national guidelines for diagnosis and treatment; and
- Design, implement, and monitor a system that acknowledges private provider contributions to TB control and fosters sustained engagement.

This MOU will be effective on the date of signing and will be valid for a period of one year. The MOU will be extended following a review and necessary updates and revisions as needed.

The undersigned agree to the terms of this MOU.

_____   _____
PHD Director   Private Health Provider

Date: _____   Date: _____

Sample partner organisation task matrix

This tool will help you to define clear roles for each partner. *In* the *task* column, list all tasks that need to be done under this project. In consensus with all partners, assign tasks to each. This matrix is a live tool that needs to be reviewed regularly to measure progress and identify problems. It summarises the details that you have developed in your work plan about which organisation will perform which activity.

Partner task matrix from the United States Agency for International Development TB PPM Initiative in Cambodia

	Tasks	NTP	PATH	Pharmacy Association of Cambodia	Public Health Dept/Municipal Health Dept/ Operational District	Public providers	Private providers
Clinical tasks	Identify TB symptoms	✓	✓	✓	✓	✓	✓
	Collect sputum samples	✓			✓	✓	
	Refer TB suspects	✓				✓	✓
	Notify/record cases	✓	✓		✓	✓	✓
	Supervise treatment	✓			✓	✓	

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

	Tasks	NTP	PATH	Pharmacy Association of Cambodia	Public Health Dept/Municipal Health Dept/ Operational District	Public providers	Private providers
	Smear microscopy	✓			✓	✓	
	Diagnose TB	✓			✓	✓	
	Prescribe treatment	✓			✓	✓	
	Inform clients about TB	✓			✓	✓	✓
Public health tasks	Strategy development	✓	✓	✓			
	Identify supportive entities	✓	✓	✓	✓		
	Tool, IEC development	✓	✓	✓	✓		
	Follow up on defaulters	✓	✓	✓	✓	✓	

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

	Tasks	NTP	PATH	Pharmacy Association of Cambodia	Public Health Dept/Munici-pal Health Dept/ Operational District	Public providers	Private providers
	Training of providers	☐	☐	☐	☐		
	Supportive supervision	☐	☐	☐	☐		
	Lab quality assurance	☐					
	M&E	☐	☐		☐		
	Supply management	☐			☐	☐	
	Stewardship, financing, regulation	☐	☐		☐		
	Advocacy	☐	☐	☐			

Tool 4.2: Partnership plan checklist and sample memorandum of understanding

Partner task matrix

Tasks	Your organisation	Partner A	Partner B	Partner C	Partner D	Partner E